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Contracting

PURCHASING INSTRUCTIONS

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction establishes local purchase procedures for Charleston AFB (CAFB) and other tenant units supported by the 437th Contracting Squadron; prescribes authority and procedures to initiate and approve purchase requests (PRs); and assigns PR initiator responsibilities. This instruction applies to all personnel assigned to the 437th Airlift Wing, to include tenant units and other supported activities.

All purchases for Services and Construction above the Micro Purchase Threshold (ref para **13.**) will use the AF Form 9, Request for Purchase shown at **Attachment 1**. Automated customers (those organizations having a supply account) will use the DD Form 1348-6, DoD Single Line Item Requisition System Document, for all Supplies above the Micro Purchase Threshold with the exceptions listed at **Attachment 2**. Because the items on **Attachment 2** require additional coordination or approvals from various organizations on base, and they are above the Micro Purchase Threshold, they will be purchased using the AF Form 9. All purchases within the Micro Purchase Threshold will be made using International Merchant Purchase Authorization Card (IMPAC) procedures.

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1. Responsibilities. The 437th Contracting Squadron Commander is responsible for the Local Purchase Program at CAFB. This program includes purchases made for tenant units and other supported activities. Emergency requirements, which occur after normal duty hours, will be referred to the Base Command Post, 963-2531, who will contact the 437th Contracting Squadron Commander for purchasing action.

2. Vendor Visits/Demonstrations. All vendor visits or product demonstrations on CAFB require approval by the 437th Contracting Squadron. A Vendor Visit/Demonstration Agreement must be signed by a contracting officer (CO) and contractor/vendor in advance of the visit or demonstration. Please contact the 437th Contracting Squadron at 3-5155 for assistance to schedule a visit or product demonstration by any vendor or contractor.

3. Unauthorized Obligations and Purchases. Contracting Officers are the only individuals legally authorized to direct the actions of vendors/contractors and obligate government funds. Such action by any person, other than an appointed contracting officer constitutes an unauthorized commitment that must be ratified. Ratification of an unauthorized commitment may result in disciplinary action or personal liability for individual(s) involved.

4. Submittal of an Electronic AF Form 9. The requesting agency is responsible for providing a complete and correctly prepared electronic package through Automated Business Services System (ABSS) to the 437th Contracting Squadron. The only exceptions to receiving AF Form 9s through ABSS are non-appropriated funds (NAF) and the Air Force Combat Climatology Center in Asheville NC. **Attachment 1** contains guidance on completing the AF Form 9 and examples of a variety of unique AF Form 9s. Items listed in **Attachment 2** require special approvals and forms from various base organizations prior to acceptance at the 437th Contracting Squadron. This electronic package will include: (1) funded AF Form 9, (2) suggested sources, and (3) detailed justification for mandatory brand name/sole source acquisitions over \$2,500 is required from the customer. The package should be ready for processing without further calls to the requesting agency for clarification or more information

5. Receiving Reports . Receiving reports must be clearly marked to indicate receipt and acceptance of goods or services. The following information is required: (1) contract/purchase order number, (2) description and quantity (should match the line item structure on the contract; for services the description should include the period the services were rendered), (3) receipt date, and (4) signature, printed name, title, mailing address, and telephone number.

6. Contract Repair Service. Equipment repair is the responsibility of the equipment custodian. The primary or alternate equipment custodian will initiate the AF Form 9 for equipment repair that exceeds the Micro Purchase Threshold. Should equipment be under warranty, ask the contractor for confirmation that no additional charges will be incurred. If charges are to be incurred, ensure the contractor does a tear down and quote first so as to preclude an unauthorized obligation.

7. Purchase Descriptions. Purchase descriptions shall state only the minimum needs of the government. They should not list restrictive features. They must describe the item or service in a way that encourages maximum competition among contractors.

7.1. Brand Name or Equal. The minimum acceptable description is identification of the item by brand name followed by the words "or equal." This should be used only when a more detailed description cannot feasibly be written. The description shall list those salient physical, functional, or other

necessary characteristics of the referenced brand name that are necessary to meet the minimum need of the government. All known acceptable brand names should be referenced at the end of the description to allow maximum competition. Potential contractors will be given an opportunity to furnish a product other than the brand name specified, providing their product meets the salient characteristics listed in the purchase request.

7.2. Brand Name. This descriptive method is the least desired as it inhibits competition and identifies a specific brand as the minimal need of the government. Competition may be wrongfully solicited from firms who handle that brand product, when in fact, if minimum needs were properly described, a number of brands would fulfill the basic requirement. Written justification is required to clearly explain why products manufactured by other competing companies must be excluded.

8. Sole Source. Customer requests for sole source acquisitions must be accompanied by a sole source justification letter. The justification must be furnished to the 437th Contracting Squadron with the AF Form 9. The customer must certify that the justification is accurate and complete to the best of their knowledge and belief and the certification will serve as written approval of the justification by the commander or chief of the functional area. If the estimated cost exceeds \$500,000, the justification must be approved by the 437th Logistics Group Commander and the 437th Airlift Wing Competition Advocate. If you believe you have a sole source requirement, contact the 437th Contracting Squadron for guidance as early as possible in the acquisition process. The text of the letter must include:

8.1. A brief non-technical description of the supplies/services to be acquired.

8.2. A clear and concise statement regarding the circumstances justifying the sole source position. If urgency is cited as the justification, the letter must explain the mission requirement driving the time constraint and why only one contractor can meet the requirement. If the justification cites the unique capabilities possessed by only one contractor, state reasons why no other contractor has or can obtain these capabilities and why they are essential for contract performance. Include any other reasons which cannot practically be avoided for exclusion of other potential sources.

8.3. A concluding statement that the proposed sole source is the only known source that can satisfy the government's requirements.

8.4. A statement of actions from the requiring activity explaining how they will prevent future sole source acquisitions of the same supplies/services. These include:

8.4.1. Conducting market surveys to determine future sources.

8.4.2. Identifying components of the acquisition that can be competitively procured.

8.4.3. Researching the possibility of the Air Force helping other firms compete in the future by providing technical (or other) assistance.

8.4.4. Seeking items currently under development which could be compatible with the sole source item being bought. They could be used to compete against the sole source in the future.

9. Federal Supply, Multi-Source and Multiple Award Schedules. Many items are subject to preferred or mandatory sources such as General Services Administration (GSA) contracts. Many GSA contracts are multiple-award schedules, which means more than one contractor is already under contract that can supply the item(s). In most cases, ordering from the contractor who is already under contract and can provide the supply or service that represents the best value is required.

10. Affirmative Procurement. The Environmental Protection Agency has designated specific classes of goods and services that are subject to recycling restrictions. These restrictions apply to purchases exceeding \$10,000 of goods and services and are identified at <http://www.epa.gov/cpg/products.htm>.

11. Emergency Purchase. This constitutes an emergency requirement so essential to the mission that it warrants preempting the entire supply/contracting requisitioning process and displaces all other customer's requirements. It can only be processed if the value exceeds \$2,500 and cannot otherwise be purchased using IMPAC. A letter, signed by the commander or chief of the functional area authorizing and justifying the emergency purchase, will contain as a minimum the following:

11.1. Reason why it was impossible to plan in advance to allow for normal purchasing action.

11.2. Specific explanation of the compelling need and the last acceptable date for meeting that need.

11.3. An impact statement which details the impact on the mission if the requirement is not procured by the needed date. This statement should be quantified, such as, risk to personnel or estimated monetary loss to the government.

12. Construction . All requirements for construction need to start with a work order request, AF Form 332, submitted to Civil Engineering (CE). CE will then decide whether the work will be done in-house, by SABER, or by contract. In-house jobs will not require an AF Form 9. SABER work will require an AF Form 9 and needs to be coordinated with the SABER office at CE for a work description. Work that will go out on contract will require an AF Form 9 for design services first, if applicable, and then an AF Form 9 for the actual construction project. The actual construction project will require a detailed statement of work for all dollar amounts. The Checklist for Project Submission to Contracting ([Attachment 3](#)) should be submitted with all construction AF Form 9 packages.

13. International Merchant Purchase Authorization Card (IMPAC). The government credit card program is another method of purchasing goods and services for government agencies. Under this program, VISA cards are issued to individuals who will use the card on behalf of their organization. It decentralizes small purchases in that the cardholder may spend up to \$2,500 on a total requirement from open market vendors or up to \$25,000 from a pre-priced GSA contract. This is known as a "Micro Purchase". Under the new Streamlining Act of 1994, the IMPAC will be used to the utmost extent to pay for "Micro Purchases".

13.1. Recurring Services : Recurring, same type monthly services under \$2,500 that added together exceed \$2,500 annually, cannot be bought using the credit card. An AF Form 9 must be submitted to the 437th Contracting Squadron by 1 July of each year so that an annual purchase order can be awarded for the service. Please see Public Folders in Outlook, 437 Logistics Group, and 437th CONS, for further instructions on IMPAC procedures or call the 437th Contracting Squadron IMPAC Program Manager at 3-5190.

DONALD R. GALLION, Colonel, USAF
Commander, 437th Logistics Group

Attachment 1

**USE INSTRUCTIONS FROM AUTOMATED BUSINESS SERVICES SYSTEM (ABSS) USER
TRAINING
GUIDE TO PREPARE AF FORM 9 PURCHASE REQUEST(S)**

| | | | | | | |
|--|---|---|------------------------------|--------------------------------------|--|--------------|
| REQUEST FOR PURCHASE | | | | | No. 1 | |
| INSTALLATION 2 | | | | | DATE 3 | |
| TO: CONTRACTING OFFICER 4 | | | | | CLASS 5 | |
| THROUGH 6 | | | | | CONTRACT, PURCHASE ORDER OR DELIVERY ORDER NO. 8 | |
| FROM: <i>(insert RC/CC if applicable)</i> 7 | | | | | | |
| IT IS REQUESTED THAT THE SUPPLIES AND SERVICES ENUMERATED BELOW AND IN THE ATTACHED LIST, BE | | | | | | |
| PURCHASED FOR 9 | | | FOR DELIVERY TO 10 | | NOT LATER THAN 11 | |
| ITEM 12 | DESCRIPTION OF MATERIAL OR SERVICES TO BE PURCHASED 13 | QUANTITY 14 | UNIT 15 | ESTIMATED UNIT PRICE 16 | ESTIMATED TOTAL COST 17 | |
| 19 TOTAL | | | | | | 18 \$ |
| PURPOSE 20 | | | | | | |
| DATE | | TYPED NAME AND GRADE OF REQUESTING OFFICIAL 21 | SIGNATURE | | | |
| | | | TELEPHONE NO. | | | |
| DATE | | TYPED NAME AND GRADE OF APPROVING OFFICIAL 22 | SIGNATURE | | | |
| | | | | | | |
| <i>I certify that the supplies and services listed above and in the attached list are properly chargeable to the following allotments, the available balances of which are sufficient to cover the cost thereof, and funds have been committed</i> | | | | | | |
| ACCOUNTING CLASSIFICATION 23 | | | | | AMOUNT 24 | |

| | | |
|------|---|-----------|
| DATE | TYPED NAME AND GRADE OF CERTIFYING OFFICIAL | SIGNATURE |
| | 25 | |

Attachment 1

**Use Instructions from Automated Business Services System (ABSS) User Training
Guide to Prepare AF Form 9 Purchase Request(s)**

Instructions to create an AF Form 9, see page C-16 in ABSS User Training Guide

Instructions on how to add line items, see page C-18 in ABSS User Training Guide

Instructions on creating and attaching Supplemental Files, see pages C-23 - 27 in ABSS User Training Guide

NOTE: Submit only one purchase request (PR) for each suggested source

BLOCK 1 – Purchase Requisition Number (May be entered manually or generated by ABSS)

The Prefixes for PR numbers are as follows:

F13 - Used to request the purchase of a commodity (supply) item

F73 - Used to request the purchase of services

FR0 - Used to request repairs or to establish a Preventive Maintenance Agreement (PMA) on equipment

See example of NON-PERSONAL SERVICES on the last page of this document

The AF Form 9 number is an alpha/numeric 14 position number compiled as follows:

Positions 1 thru 3 (F13, F73 or FR0) identify the type of purchase

Positions 4 thru 6 is the requester's Supply Account Code

Position 7 is the last digit of the current calendar year

Positions 8 thru 10 is the Julian Date

Positions 11 through 14 are numbered consecutively. The first PR for each Julian day would be 0100, the 2nd on the same day would be 0200, etc.

EXAMPLE:

F13 824 0039 0100

BLOCK 2 – Installation: self-explanatory

BLOCK 3 – Enter date the AF Form 9 is prepared

BLOCK 4 – 437 CONS/LGCW

BLOCK 5 – Leave blank

BLOCK 6 – 437 AW/FMA and FMFL

BLOCK 7 – Customer organization, office symbol, and telephone number of point of contact

BLOCK 8 – No entry necessary unless form applies to a current purchase or contract number

BLOCK 9 – Customer unit and office symbol

BLOCK 10 – Street address, building number, and room number where services are to be performed or where commodity is to be delivered

BLOCK 11 – Enter the applicable two position priority designator and the required delivery date (see Priority Designators Choices below)

Priority Designators

For Commodity Orders, use:

Priority 01 through 08 –

Or

Priority 09 through 15 – Identifies a routine requirement and the delivery time is thirty (30) days or more

For Services/Repair Orders, use:

Priority 08 - Identifies a priority requirement and the delivery time is less than thirty (30) days.

This type requirement must be accompanied by a priority justification letter signed by squadron commander or division chief.

Or

Priority 09 - Identifies a routine requirement and the delivery time is thirty (30) days or more

HEADER AREA of PR in ABSS

When creating AF Form 9s in ABSS, any information entered in the “HEADER” area will appear in Block 13 prior to the description of line items. Use the HEADER area to enter:

The appropriate NON-Personal Services Statement for Repairs, Services or Preventive Maintenance Agreements (PMAs). As a convenience, these statements are already loaded in ABSS, simply make a selection from the drop list.

BLOCK 12 – This four (4) position line item number is determined by the last four numbers in the Purchase Requisition Number (See Block 1)

BLOCK 13 – Description of material or services to be purchased. Enter an item description or specification of the item being requested or the service to be performed

NOTE: Always include the manufacturer’s name and model/part number in description

BLOCK 14 – Enter the quantity desired for each line item

BLOCK 15 – Enter a two position alpha unit of issue code (EA-Each, , PR-Pair, LB-pound, etc.)

Use LS-Lump Sum instead of JB-JOB

BLOCK 16 – Enter an estimated unit price for each line item, based on current market information, catalogs, magazines, etc. If information is not available, enter your best estimate

BLOCK 17 - ABSS will compute and enter this amount

BLOCK 18 – ABSS will compute and enter this amount

FOOTER AREA of PR in ABSS

After all line item information is entered, use the “FOOTER” area to:

Enter the name, address, telephone, and fax number of a suggested source

To call attention to any documents that are attached in the Supplemental Files

Some of the documents that can be attached to AF Form 9s in ABSS using Supplemental Files are:

Letters: Sole Source, Brand Name, and Priority Justification

Statement of Work (SOW)

Government Cost Estimates

Floors Plans

NOTE: DO NOT use the supplemental files to continue line items or to attach an itemized list

UNICOR Waivers (Mandatory on ALL request(s) for furniture, shelving, when the suggested source is other than UNICOR)

Any other WORD document that may be useful

NOTE: Attachment documents must be created in Microsoft Word or/Excel

BLOCK 19 – Leave blank

BLOCK 20 – This is a mandatory field. It should also be used to enter the CSRD Number from a 437th Communication Squadron approved AF Form 3215

BLOCK 21 – Self explanatory

BLOCK 22 – Self explanatory

BLOCK 23 – Enter accounting classification provided by resource advisor (leave blank spaces as required). The complete fund citation must be certified by the Comptroller

BLOCK 24 – The amount here should be the same as the amount entered in Block 18 as the total. This is the total amount to be certified by the Comptroller

BLOCK 25 – Self explanatory

NON-PERSONAL SERVICE STATEMENTS AND THEIR USE:

If the PR Number begins with (FR0) for REPAIR, use the following statement:

NON-PERSONAL SERVICES: Contractor will furnish all plant, labor, material, parts, and equipment necessary to tear down and quote (as required) and/or repair the following listed item(s) in accordance with the manufacturer’s specifications and/or best commercial practice. All defective parts removed as a result of the repairs required to place this item in satisfactory working condition will be returned or left with the repaired item.

CERTIFICATION:

“I certify that government repair facilities cannot be made available at this time. I certify that I have contacted Base Supply and Depot repair is not available.”

Requirements for AF Form 9s Requesting Repairs are:

Noun, manufactures name, and model number/serial number

Characteristics such as voltage, cycles, dimensions, and end item

Date purchased, if known, and warranty/guarantee expiration date

Replacement value of equipment being repaired

Symptoms or description of malfunction to be repaired

Suggested repair source, if known

Name and telephone number of unit point of contact

Building and room number where equipment is located

Estimated repair cost

Maximum repair allowance

Required completion date of repair

Equipment custodian name and telephone number

Inspector's name and telephone number (if not the equipment custodian)

Supervisor of the equipment custodian and phone number

If the PR Number begins with (FR0-zero) for a Preventive Maintenance Agreement (PMA), use the following statement:

NON-PERSONAL SERVICES: Contractor will furnish preventive maintenance and/or repair of the equipment listed below in accordance with the terms and conditions of the agreement, for the period _____ through _____.

If the PR Number begins with (F73) for SERVICES, use the following statement:

NON-PERSONAL SERVICES: Contractor will furnish qualified personnel to perform the services listed below in strict accordance with the statement of work.

| | |
|--|--|
| REQUEST FOR PURCHASE | No. F7382400390100 |
| INSTALLATION Charleston Air Force Base, South Carolina 29404-5021 | DATE 8 Feb 00 |
| TO: CONTRACTING OFFICER 437 CONS/LGCW | CLASS |
| THROUGH 437 AW/FMA and FMFL | CONTRACT, PURCHASE ORDER OR DELIVERY ORDER NO. |
| FROM: <i>(insert RC/CC if applicable)</i> 437 CONS/LGCV | |

| IT IS REQUESTED THAT THE SUPPLIES AND SERVICES ENUMERATED BELOW AND IN THE ATTACHED LIST, BE | | | | | |
|---|--|--------------------------------------|---------------------------|--------------------------------|----------------------|
| PURCHASED FOR 437 CONS/LGCV | | FOR DELIVERY TO 101 E. Hill Blvd. | | NOT LATER THAN 15- 8 Mar 00 | |
| ITEM | DESCRIPTION OF MATERIAL OR SERVICES TO BE PURCHASED | QUANTITY | UNIT | ESTIMATED UNIT PRICE | ESTIMATED TOTAL COST |
| 0100 | <p>NON-Personal Services: Contractor will furnish qualified personnel to perform the services listed below in strict accordance with the statement of work.</p> <p><u>(SERVICES) SAMPLE</u></p> <p>To disassemble., relocate and re-assemble four (4) Times II files</p> <p>Location: From Room 121on 1st Floor in B-502 to Room 135 on the 2nd floor in same building</p> <p>Model Number: 4XS2</p> <p>Serial Number: NA</p> <p>Name of Mfg.: Times II</p> <p>Sole Source Letter (See Supplemental Files)</p> <p>Suggested Source:</p> <p>Consolidated Business Machines, Inc.</p> <p>30 Cross Country Lane</p> <p>N. Charleston, SC 29418</p> <p>(843)-555-0000 POC: Mr. Wright Now</p> | 1 | LS | 2,501.00 | 2,501.00 |
| TOTAL | | | | | \$2,501.00 |
| PURPOSE | | | | | |
| DATE 8 Feb 00 | TYPED NAME AND GRADE OF REQUESTING OFFICIAL | | SIGNATURE | | |
| | JOHN ANYBODY, GS-9 CONTRACT SPECIALIST | | TELEPHONE NO. 963-0000 | | |
| DATE 8 Feb 00 | TYPED NAME AND GRADE OF APPROVING OFFICIAL SUSAN SOMEBODY, GS-9 SQUADRON, RESOURCE ADVISOR | | SIGNATURE | | |
| I certify that the supplies and services listed above and in the attached list are properly chargeable to the following allotments, the available balances of which are sufficient to cover the cost thereof, and funds have been committed | | | | | |

| | | |
|---------------------------|---|------------|
| ACCOUNTING CLASSIFICATION | | AMOUNT |
| | | \$2,501.00 |
| DATE | TYPED NAME AND GRADE OF CERTIFYING OFFICIAL | SIGNATURE |
| 8 Feb 00 | GLENN MONEY, SSGT, USAF | |

| | | | | | |
|--|--|--|--------------------------------|-------------------------|-------------------------|
| REQUEST FOR PURCHASE | | No. F1382400390100 | | | |
| INSTALLATION Charleston Air Force Base, South Carolina 29404-5021 | | DATE 8 Feb 00 | | | |
| TO: CONTRACTING OFFICER 437 CONS/LGCW | | CLASS | | | |
| THROUGH 437 AW/FMA and FMFL | | CONTRACT, PURCHASE ORDER OR DELIVERY ORDER NO. | | | |
| FROM: <i>(insert RC/CC if applicable)</i> 437 CONS/LGCV | | | | | |
| IT IS REQUESTED THAT THE SUPPLIES AND SERVICES ENUMERATED BELOW AND IN THE ATTACHED LIST, BE | | | | | |
| PURCHASED FOR 437 CONS/LGCV | | FOR DELIVERY TO 101 E. Hill Blvd. | NOT LATER THAN 15- 8 Mar 00 | | |
| ITEM | DESCRIPTION OF MATERIAL OR SERVICES TO BE PURCHASED | QUANTITY | UNIT | ESTIMATED UNIT PRICE | ESTIMATED TOTAL COST |

| | | | | | |
|---|--|--|----|----------------------|------------|
| 0100 | <u>Card, external, Jetdirect, Network, Internet, 10BASE2</u> Mfg.: Hewlett Packard P/N: J2591A | 15 | EA | 100.00 | 1500.00 |
| 0101 | Printer, Laserjet, 6PXI with Interface card and power cord Mfg.: Hewlett Packard P/N: C4213A <u>Commodity</u> <u>(ADP Hardware/Software)</u> <u>SAMPLE</u> <u>Approved AF 3215 attached(See supplemental Files)</u> Suggested Source: Hewlett Packard 54 Cross Country Lane N. Charleston, SC 29418 (843)-555-0000 POC: Mr. Wright Now | 3 | EA | 500.00 | 1500.00 |
| TOTAL | | | | | \$3,000.00 |
| PURPOSE To upgrade existing computer equipment. CSRD Number 00-9999 | | | | | |
| DATE 8 Feb 00 | TYPED NAME AND GRADE OF REQUESTING OFFICIAL JOHN ANYBODY, GS-9 CONTRACT SPECIALIST | SIGNATURE TELEPHONE NO. 963-0000 | | | |
| DATE 8 Feb 00 | TYPED NAME AND GRADE OF APPROVING OFFICIAL SUSAN SOMEBODY, GS-9 SQUADRON, RESOURCE ADVISOR | SIGNATURE | | | |
| I certify that the supplies and services listed above and in the attached list are properly chargeable to the following allotments, the available balances of which are sufficient to cover the cost thereof, and funds have been committed | | | | | |
| ACCOUNTING CLASSIFICATION | | | | AMOUNT \$3,000.00 | |

| | | |
|------------------|---|-----------|
| DATE 8 Feb 00 | TYPED NAME AND GRADE OF CERTIFYING OFFICIAL GLENN MONEY, SSGT, USAF | SIGNATURE |
|------------------|---|-----------|

| | | | | | |
|--|--|--------------------------------------|------|---|-------------------------|
| REQUEST FOR PURCHASE | | | | No. F1382400390100 | |
| INSTALLATION Charleston Air Force Base, South Carolina 29404-5021 | | | | DATE 8 Feb 00 | |
| TO: CONTRACTING OFFICER 437 CONS/LGCW | | | | CLASS | |
| THROUGH 437 AW/FMA and FMFL | | | | CONTRACT, PURCHASE ORDER OR DELIVERY ORDER NO. | |
| FROM: <i>(insert RC/CC if applicable)</i> 437 CONS/LGCV | | | | | |
| IT IS REQUESTED THAT THE SUPPLIES AND SERVICES ENUMERATED BELOW AND IN THE ATTACHED LIST, BE | | | | | |
| PURCHASED FOR 437 CONS/LGCV | | FOR DELIVERY TO 101 E. Hill Blvd. | | NOT LATER THAN 15- 8 Mar 00 | |
| ITEM | DESCRIPTION OF MATERIAL OR SERVICES TO BE PURCHASED | QUANTITY | UNIT | ESTIMATED UNIT PRICE | ESTIMATED TOTAL COST |

| | | | | | |
|---|--|----|---------------|------------|------------|
| 0100 | <p><u>Table. Square with 4-star base, high pressure laminate top.</u></p> <p>Vinyl edge and self-adjustable glides</p> <p>Laminate: H-21 White Spex</p> <p>Vinyl Edge: TR-K Charcoal</p> <p>Size: 29"H x 36"W x 36"D</p> <p>Mfg.: Haworth, Inc.</p> <p>P/N: HTS-3636 H-21 TR-K</p> <p><u>Commodity(Furniture)</u></p> <p><u>SAMPLE</u></p> <p><u>UNICOR Waiver No. #345566 attached(See supplemental Files)</u></p> <p>Suggested Source:</p> <p>Haworth, Inc.</p> <p>54 Cross Country Lane</p> <p>N. Charleston, SC 29418</p> <p>(843)-555-0000 POC: Mr. Wright Now</p> | 15 | EA | 200.00 | 3000.00 |
| TOTAL | | | | | \$3,000.00 |
| PURPOSE | | | | | |
| To match existing furniture | | | | | |
| DATE | TYPED NAME AND GRADE OF REQUESTING OFFICIAL | | SIGNATURE | | |
| 8 Feb 00 | JOHN ANYBODY, GS-9 | | TELEPHONE NO. | | |
| | CONTRACT SPECIALIST | | 963-0000 | | |
| DATE | TYPED NAME AND GRADE OF APPROVING OFFICIAL | | SIGNATURE | | |
| 8 Feb 00 | SUSAN SOMEBODY, GS-9 | | | | |
| | SQUADRON, RESOURCE ADVISOR | | | | |
| I certify that the supplies and services listed above and in the attached list are properly chargeable to the following allotments, the available balances of which are sufficient to cover the cost thereof, and funds have been committed | | | | | |
| ACCOUNTING CLASSIFICATION | | | | AMOUNT | |
| | | | | \$3,000.00 | |

| | | |
|------------------|--|-----------|
| DATE 8 Feb 00 | TYPED NAME AND GRADE OF CERTIFYING OFFICIAL GLENN MONEY, SSGT, USAF | SIGNATURE |
|------------------|--|-----------|

| | | | | | |
|---|---|--------------------------------------|------|---|-------------------------|
| REQUEST FOR PURCHASE | | | | No. FR082400390100 | |
| INSTALLATION Charleston Air Force Base, South Carolina 29404-5021 | | | | DATE 8 Feb 00 | |
| TO: CONTRACTING OFFICER 437 CONS/LGCW | | | | CLASS | |
| THROUGH 437 AW/FMA and FMFL | | | | CONTRACT, PURCHASE ORDER OR DELIVERY ORDER NO. | |
| FROM: <i>(insert RC/CC if applicable)</i> 437 CONS/LGCV | | | | | |
| IT IS REQUESTED THAT THE SUPPLIES AND SERVICES ENUMERATED BELOW AND IN THE ATTACHED LIST, | | | | | |
| BE PURCHASED FOR 437 CONS/LGCV | | FOR DELIVERY TO 101 E. Hill Blvd. | | NOT LATER THAN 15- 8 Mar 00 | |
| ITEM | DESCRIPTION OF MATERIAL OR SERVICES TO BE PURCHASED | QTY | UNIT | ESTIMATED UNIT PRICE | ESTIMATED TOTAL COST |

| | | | | | | |
|---|---|--|-----------------------|----|-------------------|------------|
| 0100 | <p>NON-Personal Services: Contractor will furnish all plant, labor, material, parts and equipment necessary to tear down and quote (as required) and/or repair the following listed item(s) in accordance with the manufacturer's specifications and/or best commercial practice. All defective parts removed as a result of the repairs required to place this item in satisfactory working condition will be returned or left with the repaired item..</p> <p>CERTIFICATION</p> <p>I certify that Government repair facilities cannot be made available at this time. I certify that I have contacted Base Supply and Depot repair is not available.</p> <p>(REPAIR) SAMPLE</p> <p>Machine, Fax/Copier</p> <p>Model Number: FO-4500</p> <p>Serial Number: F3452600-88</p> <p>Name of Mfg.: Sharp</p> <p>PROBLEM: Doesn't transmit or receive, copies have a dark line across each page and unit will not stop ringing</p> <p>Sole Source Letter and Statement of Work (See Supplemental Files)</p> <p>Suggested Source:</p> <p>Consolidated Business Machines, Inc.</p> <p>30 Cross Country Lane</p> <p>N. Charleston, SC 29418</p> <p>(843)-555-0000 POC: Mr. Wright Now</p> | | 1 | LS | 2,501.00 | 2,501.00 |
| TOTAL | | | | | | \$2,501.00 |
| PURPOSE | | | | | | |
| DATE | TYPED NAME AND GRADE OF REQUESTING OFFICIAL | | SIGNATURE | | | |
| 8 Feb 00 | JOHN ANYBODY, GS-9 | | TELEPHONE NO.963-0000 | | | |
| | CONTRACT SPECIALIST | | | | | |
| DATE | TYPED NAME AND GRADE OF APPROVING OFFICIAL | | SIGNATURE | | | |
| 8 Feb 00 | SUSAN SOMEBODY, GS-9 | | | | | |
| | SQUADRON, RESOURCE ADVISOR | | | | | |
| <p><i>I certify that the supplies and services listed above and in the attached list are properly chargeable to the following allotments, the available balances of which are sufficient to cover the cost thereof, and funds have been committed</i></p> | | | | | | |
| ACCOUNTING CLASSIFICATION | | | | | AMOUNT \$2,501.00 | |

| DATE | TYPED NAME AND GRADE OF CERTIFYING OFFICIAL | SIGNATURE |
|----------|---|-----------|
| 8 Feb 00 | GLENN MONEY, SSGT, USAF | |

Attachment 2

SPECIAL REQUIREMENTS

| ITEM | COORDINATION |
|----------------------|--|
| | |
| Advertisement | Base PA and a letter from command |
| Computers | 437th Communication Squadron (AF Form 3215) |
| Computer Peripherals | |
| | |
| Buildings | 437th Civil Engineer Squadron (AF Form 332) |
| Gazebos | |
| Signs | |
| Keys | |
| Carpet | |
| Wallpaper | |
| Plants | |
| Trailers | |
| Tents | |
| Drapes/Curtains | |
| Systems Furniture | Note: All furniture not purchased through the Federal Business Industries (UNICOR) requires a waiver |
| | |
| Vehicle Leases | 437th Transportation Squadron |
| | |

Note: Leave Block 1 (PR number) and funding authorization blank on all form 9's requiring CE coordination. The PR number will be completed by CE funds manager when CE approval for purchase is obtained.

Attachment 3

CHECKLIST FOR PROJECT SUBMISSION TO CONTRACTING

| CHECKLIST FOR PROJECT SUBMISSION TO CONTRACTING | |
|---|--|
| Project Title: _____ | |
| Instructions: Ensure that each of the following items are included in the project package. Indicate either a "yes" or "N/A" for each item. Enclose a copy of this completed checklist with the project package. | |
| 1. AF Form 9 (If reserved or advanced funding, forward copy of message. Identify project engineer.) Form 9's for Construction should have a number starting with FQ4418... | |
| 2. Total Performance Time (Specify separately how many bad weather days are included in the total performance time). | |
| 3. Project Inspector Letter from CECC. | |
| 4. Ozone Depleting Chemicals Statement (Required for all projects). | |
| 5. Statement of current (less than 3 years old) asbestos survey completed. | |
| 6. Liquidated Damages Sheet. If Statutory Cost Limitation applies, so state. | |
| 7. Government Estimate (Funds on AF Form 9 should be the same amount unless additives or alternates are present). | |
| 8. AF Form 66 - Material Submittals. | |
| 9. Section B (Applicable if the project includes alteration and repair, additives, estimated quantities, or a statutory cost limit applies). | |
| 10. Specifications and drawings (CD-ROM disk and 1 copy). | |
| 11. 95% Review Comments (LGCK comments must be addressed prior to package submission). | |

| | |
|---|--|
| <p>12. Government Furnished Property (If yes, provide Section which cites the following:</p> <ul style="list-style-type: none">a. Description that includes nomenclature, quantity, part number and specify if new or used equipment.b. Location of equipment.c. When will contractor take possession?) <p>Note: GFP must be on base prior to issuance of Notice to Proceed.</p> | |
| <p>13. Certification from the Project Engineer that each page of the drawings and specifications has been verified against the data on the CD-ROM.</p> | |
| <p><u>SPECIAL NOTE:</u> THE PROJECT PACKAGE SHOULD INCLUDE ALL OF THE ABOVE INFORMATION. IF ANY OF THIS INFORMATION IS NOT INCLUDED IN THE PACKAGE AT TIME OF SUBMISSION, THE "ENTIRE" PACKAGE WILL BE RETURNED FOR RESUBMISSION AT A LATER DATE WHENEVER ALL INFORMATION IS AVAILABLE.</p> | |